

APPLICATION FOR VOTE BY MAIL BALLOT

Please type or print clearly in ink. All information required unless marked optional.

I hereby apply for a Mail-In Ballot for the:

(CHECK ONLY ONE)

☐ General (November) ☐ Primary ☐ Municipal ☐ School ☐ Fire
☐ Special _____ To be held on ____/____/____
(Specify) (Date)

MILITARY/OVERSEAS VOTER ONLY

I request Vote-By-Mail Ballots for all elections in which I am eligible to vote and I am **(MARK ONLY ONE)**
☐ A Member of the Uniformed Services or Merchant Marine on active duty, or an eligible spouse or dependent.
☐ A U.S. Citizen residing outside the U.S. and I intend to return.
☐ A U.S. Citizen residing outside the U.S. and I do not intend to return.

Last Name (Type or Print)

First Name (Type or Print)

Middle Name or Initial

Suffix (Jr., Sr., III)

Address at which you are registered to vote

Street Address or RD#

Apt.

Municipality (City/Town)

State

Zip

Mail my ballot to the following address:

☐ Same Address as Section 3

Please include
any

PO Box, RD#,

State/Province,

Zip/Postal Code

& Country

(if outside US)

Date of Birth

Day Time Phone Number

E-Mail Address (Optional)

Signature

Please sign your name as it appears in the Poll Book.

Today's Date

OPTIONAL - ONLY COMPLETE SECTIONS 10 THROUGH 12 IF APPLICABLE

Voter Options to Automatically Receive Ballots in Future Elections

You may choose either option, both options, or none of the options. **YOU ARE NOT REQUIRED TO CHOOSE AN OPTION.**
If you do not choose any option, you will only be sent the ballot for the election you chose in Section 1.

- *A** ☐ I wish to receive a Mail-In Ballot for all elections to be held during the **REMAINDER OF THIS CALENDAR YEAR.**
***B** ☐ I wish to receive a Mail-In Ballot in **ALL FUTURE NOVEMBER GENERAL ELECTIONS**, until I request otherwise.

***Please Note:** Your ballot can only be sent to the mailing address supplied on this application; if your address changes, you must notify the County Clerk in writing.

Assistor

Any person providing assistance to the voter in completing this application must complete this section.

Name of Assistor (Type or Print)

Signature of Assistor

Date

Address

Apt.

Municipality (City/Town)

State

Zip

Authorized Messenger

Any voter may apply for a Mail-In Ballot by Authorized Messenger. Messenger shall be a family member or a registered voter of this County. No Authorized Messenger can (1) be a Candidate in the election for which the voter is requesting a Mail-In Ballot or (2) serve as messenger for more than TEN qualified voters per election.

I designate _____ to be my Authorized Messenger.

Print Name of Authorized Messenger

Address of Messenger

Apt.

Municipality (City/Town)

State

Zip

Date of Birth

Signature of Voter

Date



Authorized Messenger must sign application and show photo ID in the presence of the County Clerk or County Clerk designee.

"I do hereby certify that I will deliver the Mail-In Ballot directly to the voter and no other person, under penalty of law."

Signature of Messenger

Date

OFFICE USE ONLY

Voter Reg # _____

Muni Code # _____ Party _____

Ward _____ District _____

Please print the Mail-In Ballot application. Complete the form. Sign the form. Scan the form. Email or fax the scanned form to your County Clerk's email address or fax number listed below.

If you have any questions, please contact your County Clerk.

Atlantic:	Phone: 609- 641-7867	Fax: 609-909-5107	Email: evote_request@aclink.org
Bergen:	Phone: 201-336-7073	Fax: 201-336-7005	Email: kcoupe@co.bergen.nj.us
Burlington:	Phone: 609-265-5122	Fax: 609-265-5032	Email: osballot@co.burlington.nj.us
Camden:	Phone: 856-225-7219	Fax: 856-756-2213	Email: electdiv@camdencounty.com
Cape May:	Phone: 609-465-1013	Fax: 609-463-0966	Email: clerk@capemaycountygov.net
Cumberland:	Phone: 856-453-4860	Fax: 856-455-1410	Email: votebymailrequest@co.cumberland.nj.us
Essex:	Phone: 973-621-4921	Fax: 973-621-5178	Email: info@essexclerk.com or cj_durkin@hotmail.com
Gloucester:	Phone: 856-853-3241	Fax: 856-251-1646	Email: ccelections@co.gloucester.nj.us
Hudson:	Phone: 201-369-3470	Fax: 201-369-3478	Email: countyclerk@hcnj.us
Hunterdon:	Phone: 908-788-1214	Fax: 908-788-1890	Email: countyclerk@hunterdon.nj.us
Mercer:	Phone: 609-989-6998	Fax: 609-394-8785	Email: vote@mercercounty.org
Middlesex:	Phone: 732-745-3827	Fax: 732-745-3642	Email: dee.anderson@co.middlesex.nj.us
Monmouth:	Phone: 732-431-7790	Fax: 732-409-4887	Email: bsumick@co.monmouth.nj.us
Morris:	Phone: 973-285-6059	Fax: 973-285-5233	Email: asmith@co.morris.nj.us
Ocean:	Phone: 732-929-2018	Fax: 732-349-4336	Email: scolabella@co.ocean.nj.us
Passaic:	Phone: 973-225-3632 ext 500	Fax: 973-742-5744	Email: hanak@passaiccountynj.org
Salem:	Phone: 856-935-7510 Ext. 820	Fax: 856-935-8882	Email: jcatalano@salemcountynj.gov
Somerset:	Phone: 908-231-7013	Fax: 908-231-9465	Email: countyclerk@co.somerset.nj.us
Sussex:	Phone: 973-579-0900	Fax: 973-383-7493	Email: sgeimer.scclerk@nac.net
Union:	Phone: 908-527-4996/4997	Fax: 908-558-3592	Email: Lbobish@ucnj.org
Warren:	Phone: 908-475-6211	Fax: 908-475-6382	Email: Pkolb@co.warren.nj.us